U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

| Office St | ates Maisilais | 301 VICC | | Oil the levelse | or ans ion | | | |
|---|--|---------------------------------------|---|---|-----------------------------------|--|---|--|
| PLAINTIFF | Tiponois | 1 Enla | <u> </u> | | | COURT CASE NUMB | | = |
| DEFENDANT MARK CANON | | | | | | TYPE OF PROCESS | 5 - 07. | 2 (3/1/2 |
| SERVE { | NAME OF INDIVIDU MAIZIC CA ADDRESS (Street or | JAL, COMPANY, NON 15 RFD, Apartment | CORPORATION A C/ No., City, State | e and ZIP Code) | 7+E 1 | TION OF PROPERTY TO | O SEIZE OR | CONDEMN |
| SEND NOTICE | OF SERVICE COPY TO | | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 198 | | | |
| JIMMIE LEWIS, SOI #506622 DEL. CORRI CENTER 1181 PADOOCK RO SMYRNA, DE 19977 | | | | | | of process to be with this Form - 285 | 4 | <u>/</u> |
| | | | | | | Number of parties to be served in this case Check for service | | |
| | | | | | | on U.S.A. | | |
| | EUCTIONS OR OTHER I | Available For Sei | rvice): APF | DATEO | : 7/1 | (Include Business and 8/06, 3/2) | 9/05, | Fold |
| Signature of Attor | mey or other Originator req | uesting service on | behalf of: | □ PLAINTIFF □ DEFENDAN | | ONE NUMBER | DATE 7 | 17/06 |
| SPACE B | ELOW FOR US | E OF U.S. | MARSHA | L ONLY — D | O NOT | WRITE BELO | W THE | S LINE |
| I acknowledge red number of proces (Sign only first than one USM 28 | s indicated. USM 285 if more | Process District of Origin | District to Serve | Signature of Auth | horized USMS | Deputy or Clerk | | 10-4-c |
| I hereby certify an on the individual, | nd return that I Whave personal company, corporation, etc. | sonally served, ., at the address sh | have legal evider lown above or on | nce of service, have the individual, compa | executed as sl any, corporatio | hown in "Remarks", the | process desci dress inserted | ribed below. |
| ☐ I hereby cert | ify and return that I am | inable to locate t | he individual, co | ompany, corporation, | etc., named a | above (See remarks be | low) | |
| Name and title o | of individual served (if no | t shown above) | nín O | HUR | | | suitable age residing in the of abode | |
| Address (complet | e only if different than sho | wn above) | ŭ | | | Date of Service | Time GO Marshal or | pm Deputy |
| Service Fee | Total Mileage Charges (including endeavors) | Forwarding Fee | Total Charges | Advance Deposits | Amount ow | ed to U.S. Marshal or | Amount | of Refund |
| REMARKS: | | | | | | | 298 | DE CO |
| | | | | | | | 2006 OCT E | RK U.S. D STRICT O |
| | | | | | | | A | FORED OFFI OFFI OFFI OFFI OFFI OFFI OFFI OFF |